'									Application	101 5	OCKELIANU	nber
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003									091	70	125	31
		ČLAIMS A	S FILED - PART I (Column 1) (Column 2)				SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
T	OTAL CLAIMS						RATE FE		7	RATE	FEE	
F(OR .	NUMBER	NUMBER FILED		NUMBER EXTRA		BASIC FEE 385		OR	BASIC FEE	770.00	
TO	TAL CHARGE	m	minus 20=		*		X\$ 9=		ÖR	X\$18=		
INI	DEPENDENT C	CLAIMS	minus 3 =		*			X43=		OR	X86=	
M	JLTIPLE DEPE	NDENT CLAIM P	PRESENT					+145=		OR	+290=	
* 11	the difference	e in column 1 is	less than zero, enter "0" in column 2			L	TOTAL		OR	TOTAL		
	CLAIMS AS AMENDED - PART II (0-24-14)										OTHER	THAN
		(Column 1)	(Column 2) (Column 3)				, ,	SMALL	ENTITY	OR	SMALL	ENTITY
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	· 10	Minus	" O	0	=		X\$ 9=		OR	X\$18=	•——
ME	Independent	* 2	Minus	*** 2	/	=		X43=		OR	X86=	<u> </u>
	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM		1	-145=		OR	+290≃	*
							A.D.	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA	. [RATE	ADDI- TIONAL FEE	*	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	,	K\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	. ;	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	145=		OR	+290=	
	TOTAL) L	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	×	(\$ 9=	·	OR	X\$18=	٠.,
	Independent	*	Minus	444		=	 	(43=		OR	X86=	 ··-·
9	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									. 200		
										OR (+290= TOTAL	
***	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										DDIT. FEE	
1	he "Highest Num	tber Previously Pai	d For" (Total o	r Independer	nt) is the	highest number	r found i	n the apt	oropriate box	in colu	umn 1. :	